

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>DA</i>	<i>1242</i>	<i>9/15/00</i>
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>DA</i>	<i>10976</i>	<i>10-24-00</i>
RESPONSE FORMALITY REVIEW	<i>DA</i>	<i>10976</i>	<i>12-17-00</i>

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	9/15/00
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	✓
11	✓
12	✓
13	✓
14	✓
15	✓
16	✓
17	✓
18	0
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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